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25227 7590 12/14/2004

MORRISON & FOERSTER LLP
1650 TYSONS BOULEVARD
SUITE 300
MCLEAN, VA 22102

03/15/2005 MBEYENE2 00000076 031952 10797075

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:8001 18.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/797,075 03/11/2004 Jan Hoogland 495812003510 4380

TITLE OF INVENTION: HOLOGRAPHIC STORAGE LENSES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/14/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
LAVARIAS, ARNEL C		2872	359-035000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Morrison & Foerster LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

InPhasē Technológiés, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Longmont, CO.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
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 Advance Order - # of Copies 6

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03 1952 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Jonathan Bockman

Typed or printed name Jonathan Bockman

Date March 11, 2005

Registration No. 45,640

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